

## CLAIMS ONLY

Application Number

" Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED 8/31/06		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep.	Depend	Indep	Depend	Indep	Depend
1	1					
2		1				
3		1				
4		1				
5	1					
6		1				
7		1				
8		1				
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50						
Total Indep	3					
Total Depend	12					
Total Claims	15					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depe
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Total Indep						
Total Depend						
Total Claims						